

UC Irvine Police Department Application for Copy of Police Report

An approved report for release will require review of a valid government issued photo ID and collection of the duplication and processing fee of \$5.00.

Processing of this request may take up to 10 calendar days.

Full Name (Last, First, Middle)		Date of Birth
Address	City	Zip
Telephone Number	E-Mail Address	
Date and Time of Incident	Type of Report (Select One)	
	Traffic Accident Cri	me
Report Number	Location of Reporting Incident	
Reason for Report Request		
Please Select		
☐ Driver ☐ Passenger ☐ Pedestrian ☐ Victim ☐ Arrestee ☐ Other (Specify):		
Certification		
I declare under the penalty of perjury that I am the party of interest identified in the report recorded hereon.		
Signature	Date	
FOR DEPARTMENT USE ONLY (Personnel to Check Applicable Boxes and Complete Required Information)		
Review Photo I.D.		
Print Type and I.D. Number:		
Collect \$5.00 fee		
Transaction completed by:		
PAYMENT METHOD (Checks are made payable to 'UC Regents')		
Cash \$		
Credit Card: VISA/MasterCard/AMEX	□ Peques	t Denied Notarized Letter
Check#:	☐ reques	t Demed Notanzed Letter
Prepared by:	Date:	